



Remittance Application Form

TO BE FILLED IN BLOCK LETTERS

Branch Name _____

Date 15-08-2023

Please process my/our remittance request as per details given below:

 Payment Order Foreign Demand Draft (FDD) Foreign Telegraphic Transfer (FTT) RTGS (PRISM) Others _____

 Remitting Currency PKR USD GBP EURO Other _____
Amount in Words FOUR HUNDRED NINETY TWO THOUSAND ONE HUNDRED AND TWENTY EIGHT ONLYAmount in Figures 492,128 Remittance Purpose _____

Beneficiary Details

 Name ORACLE SYSTEMS PAKISTAN (PRIVATE) LIMITED Beneficiary Address 4th Floor, Ufone Tower, SSC Main Ginnah Avenue, Blue Area, Islamabad
Contact # 92-21-35839221

CNIC /Passport # OR NTN # (for Corporate entities) _____

Beneficiary Additional Details (As Applicable For Fdd , Ftt, Rtgs Only)

Beneficiary's Account / IBAN # 0100485-001Bank Name & Address CITIBANK, N.A.ABA NO /SWIFT Code/ SORT Code CITIPKX

Drawn on City/Country _____ Relationship with the Beneficiary _____

Intermediary Bank (optional) Bank Name & Address _____

SWIFT Code / SORT CODE _____

Applicant's Details

Account Title THE ZEAL SOFT (PVT) LIMITED Account # 0549712002Account Currency PKR Cheque # _____CNIC /Passport # OR NTN # (for Corporate entities) 5284866Applicant Address PLOT # 35-C, ATCO CENTRE, 1ST & 2ND FLOOR, P.E.C.H.S, BLOCK 2, KARACHI

Date of Birth _____ Nationality _____

I/We hereby confirm and understand Terms and condition mentioned overleaf and authorize you to debit my/our account for applicable charges as per current schedule for execution of this request.

THE ZEAL SOFT (PVT) LTD.

Account Holder's Signature & Seal (if Applicable)

Authority To Third Party To Collect

Acknowledgment Receipt

I/We Hereby authorize Mr./Mrs/Ms _____ having CNIC No (Copy enclosed) _____ To collect the above mentioned PO/DD/FDD on my/our behalf.

I/ We hereby acknowledge the receipt the above PO /FDD

Account holder's Signature

Signature of Authorized person

Account holder's Signature

THE ZEAL SOFT (PVT) LTD.

For Bank Use Only

We confirm having issued instrument No. _____ TT Reference # _____

and charges have been recovered as per schedule of charges.

Correspondent charges - ourselves / Beneficiary / Sharing _____

For FTT only: Cash Handling Charges Recoverd Not Applicable